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Held at Headquarters, New York, on Thursday, 1 July 2010, at 3 p.m.

President: Mr. Ali (Malaysia)

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The meeting was called to order at 3.05 p.m.

Annual ministerial review: implementing the internationally agreed goals and commitments in regard to gender equality and empowerment of women (continued)

National voluntary presentations (E/2010/63, E/2010/78 and E/2010/80)

Australia (E/2010/63)

1. **The President** said that he would act as moderator for the national voluntary presentations.

2. **Mr. McMullan** (Australia), Parliamentary Secretary for International Development Assistance, accompanying his presentation with computerized slides, said that Australia's ambitious approach to international development had led to a doubling of its aid programme between 2005 and 2010. The programme would be doubled again by 2015, with a 14 per cent increase planned for the coming budget year. In Africa, Australia shared its experience of dryland and semi-arid farming, while in Latin America and the Caribbean, it offered its experience of working with Pacific small island States. Australia was also increasing its development assistance to South Asia, especially to Bangladesh, Sri Lanka and Nepal, while other recipient countries included Afghanistan. However, the majority of such assistance was concentrated in the Asia and the Pacific region.

3. Recent measures to increase aid effectiveness included a review of the role of technical advisers. The Pacific Partnerships for Development initiative and the Cairns Compact on Strengthening Donor Coordination in the Pacific were examples of how to apply the Paris and Dakar principles on aid effectiveness. In order to ensure development for all, Australia was increasingly targeting the most disadvantaged groups, including persons with disabilities living in poverty. Donors could play an important role in drawing attention to development issues such as mental health, ageing populations and non-communicable diseases.

4. Gender equality was part of sensible development, as women's access to education and economic opportunities led to lower birth rates, improved health for families and economic growth. Women's participation in policymaking and decision-making improved the lives of all. Australia was currently one of the highest-ranking countries in terms

of gender equality in health and education and had recently elected its first woman Prime Minister, while the Governor General and a number of state premiers were also women. Such progress had taken a long time in Australia and he said he hoped that developing countries would see similar changes more quickly.

5. Australia was expanding the number of scholarships offered to individuals from developing countries and would offer 1,000 scholarships a year across Africa by 2013. Forty per cent of the scholarships would be awarded to women.

6. In Papua New Guinea, where Australia was supporting efforts to reduce violence against women, the number of female village court magistrates had increased significantly. In Timor-Leste, Australia was contributing to a community-based education programme run by the Association of Men Against Violence.

7. Australia was supporting Papua New Guinea's Universal Basic Education Plan, which aimed for 70 per cent primary school enrolment by 2015. In Indonesia, Australia was assisting to a programme to build 2000 schools where over 50 per cent of the students would be girls and children with disabilities would be accepted. In the Lao People's Democratic Republic, Australia was contributing to a programme that had built 125 new schools in remote and poor areas in 2009. In the Solomon Islands, Australia was assisting with the provision of appropriate water and sanitation facilities for schools.

8. In the area of maternal and child health, Australia was focusing on improving health systems in the areas of financing, procurement of medicines and training of nurses and midwives. In Ethiopia, funding was provided for the Addis Ababa Fistula Hospital, where the midwifery college trained young women to become skilled midwives, a best practice model which could be applied in other parts of Africa. The aid programme sought to provide the same range of reproductive health and family planning services for women that was available in Australia, subject to the laws of the country concerned. Australia was providing funds to Timor-Leste to train 54 midwives and was committed to working with its partners to promote gender equality and empower women through an expanded and more effective aid programme.

9. **Ms. Borges** (Observer for Timor-Leste), reviewer, commended Australia for its contribution to

Timor-Leste's nation-building efforts. The two countries had collaborated on a range of issues including peace and security, water and sanitation and capacity-building in key State institutions and civil society. The Australia-Timor-Leste Country Strategy 2009 to 2014 had successfully adopted a partnership approach. Timor-Leste strongly supported Australia's efforts to monitor and evaluate aid programmes, including through annual reviews of development effectiveness. His Government welcomed the review of the role of technical advisers and Australia's efforts to conduct assessments of its financial assistance.

10. Timor-Leste was committed to achieving the Millennium Development Goals (MDGs) but faced significant challenges as a small island developing State which had recently emerged from conflict. As development assistance and security were intrinsically linked, conflict and insecurity could often reverse development gains and undermine progress towards gender equality and the MDGs. Timor-Leste would appreciate more targeted programmes for women, who were particularly vulnerable in post-conflict States.

11. The Australia-Timor-Leste country strategy was designed to improve maternal and child health, support young men and women in finding jobs, increase agricultural productivity and support the national Government in building a more accountable and effective public administration and a safer community. Community-based initiatives included the rural water supply and sanitation programme, which had improved girls' attendance at school and brought improvements in maternal health. The 25 per cent reduction in child mortality, and 14 per cent increase in the number of children under one year of age vaccinated against measles were some of the indicators of success. The number of births attended by skilled health workers had increased by 66 per cent over the past six years. The upcoming high-level meeting on the MDGs would provide the momentum needed for Member States to renew their commitments.

12. **Mr. Aisi** (Observer for Papua New Guinea), reviewer, said that Papua New Guinea and Australia's robust political and diplomatic relationship was further enhanced by many commercial relationships as well as steadily growing ties of friendship and family connections. Papua New Guinea received a large proportion of Australia's aid budget. Goal 8 of the MDGs encouraged partnerships between donor and recipient countries and the consultation process with

the recipient country was a critical component for aid to be effectively administered.

13. In August 2009, leaders at the Pacific Islands Forum had recognized that sexual and gender-based violence was a risk to human security and a potential destabilizing factor for communities and societies alike. In all Member States, such violence was a criminal offence, but enforcement was a matter of great concern as cultural attitudes often allowed such crimes to go unpunished. Perhaps there was a critical need to work with law enforcement agencies in that area. He also wondered whether sufficient priority was being given to educating boys and young men in order to sensitize them to gender issues. Some concerned groups had emerged to address the issue of violence against women, including the Association of Men against Violence of Timor-Leste.

14. All Member States wanted aid to be effective so that projects made a greater contribution to national development and were owned by the people of the country. If rural development was to be the backbone of development, then the rural majority should be represented in the aid discussions in order to ensure that aid was both relevant and effective.

15. **Mr. Cravinho** (Observer for Portugal), Secretary of State, reviewer, congratulated Australia for meeting its development assistance commitments and for its efforts to contribute to achieving the MDGs. He asked whether gender impact was one of the criteria for funding of aid programmes and projects. Was Australia considering the adoption of a national action plan to implement Security Council resolution 1325 (2000) on women, peace and security? It would also be interesting to hear how Australia incorporated the gender dimension into its efforts to support institutional consolidation in fragile States. He wondered whether Portugal, Australia and Timor-Leste could do more together in relation to the gender dimension in Timor-Leste.

16. **Mr. McMullan** (Australia) said that there was necessarily some fragility in States such as Timor-Leste that were still emerging from the impact of past conflict. There were two main areas where greater efforts were needed: maternal mortality and violence against women. Indeed, every Member State, including Australia, needed to do more about gender-based violence. In Timor-Leste, increased emphasis was being given to addressing violence against women

through the criminal law system. Domestic violence was always a crime and should be dealt with accordingly.

17. The Australian aid agency had a gender unit which was responsible for gender impact assessment in project development. Gender impact assessment had been a long-standing priority, even under previous Governments, but there was still room for improvement.

18. With regard to Security Council resolution 1325 (2000), an interdepartmental committee was already working on the action plan. His Government had financed the publication of an inventory of best practices for reducing gender-based violence in situations of conflict, which he had launched on the previous day. The inventory had been compiled through a joint effort by the Department of Peacekeeping Operations, United Nations Action Against Sexual Violence in Conflict and the United Nations Development Fund for Women.

19. **Ms. Renford** (Israel) said that education, the flagship of the Australian aid programme, was the best investment for development and gender equality. She asked whether Australia's technical assistance was geared specifically to delivering basic services to populations in need and whether those efforts were carried out directly with each Government or through non-governmental organizations (NGOs) in the field. She hoped that other countries would follow Timor-Leste's example and set up their own associations of men against violence.

20. **Mr. McMullan** (Australia) said that Australia provided technical assistance in response to requests from partner Governments. However, it had untied its aid provisions and would continue to reduce the proportion of aid provided as technical assistance. Australia worked with partner Governments but also with NGOs and with multilateral agencies. For example, a partnership of agencies run by different Australian churches was currently providing 50 per cent of Papua New Guinea's health services. He agreed that it was important to target men's attitudes in order to change their behaviour, rather than changing the behaviour of women.

Congo (E/2010/78)

21. **Ms. Leckomba Loumeto-Pombo** (Congo), Minister for the Promotion of Women and the

Integration of Women in Development, accompanying her presentation with computerized slides, said that the Congo's poverty reduction strategy document for 2008-2010 included gender as an assessment criterion in the area of governance. The national plan for achieving the MDGs included actions to reduce inequalities between the sexes in education, improve sexual and reproductive health services; ensure equal participation in political life and the economy; and reduce violence against women. The National Gender Policy provided for gender mainstreaming in institutions and in development programmes and projects; improved access to production support services; promotion of equitable participation in power; respect for rights and elimination of violence; strengthening of institutional mechanisms; and improvement of the social status of women.

22. Up to the age of 16, primary and secondary education was compulsory, non-discriminatory and free of charge in public schools. The primary enrolment rate had increased from 72 per cent in 2005 to 82 per cent in 2008, while the primary completion rate had increased from 62.3 per cent in 1990 to 77 per cent in 2008. The ratio of girls to boys at primary and secondary level was coming close to parity, but at the tertiary level it was lower, reaching 0.60 in 2007.

23. The problems faced included a high dropout rate and parents' low purchasing power. Measures had been taken to keep pregnant girls in the school system, abolish school fees and provide free textbooks. Positive discrimination was being established by offering merit scholarships and internships.

24. On the issue of maternal health, she said that maternal mortality rates were high, especially for young women between the ages of 20 and 24. The main causes were induced abortions, haemorrhage during delivery, post-abortion infection and malaria. Maternal health care was expensive, health centres had insufficient equipment and supplies and there was a lack of emergency obstetric services.

25. Prenatal check-ups were conducted at all health clinics and hospitals and insecticide-treated bed nets were distributed to nursing mothers. Integrated health centres and large hospitals were being provided with equipment and medicines for obstetric, neonatal and emergency care. Vaccinations were provided systematically for pregnant women while children and

persons living with HIV/AIDS were provided with tests and anti-retroviral medicines free of charge.

26. Management capacities needed to be strengthened at all levels and budgetary allocations would have to be increased to provide low-cost access to care and to maintain and improve existing facilities. The drug procurement system also required improvement. In order to ensure progress, the Government would have to cover 60 per cent of the cost of prenatal consultations and provide caesareans free of charge.

27. Women were underrepresented in the civil service and in politics. They had accounted for just over 20 per cent of members of Parliament in 2007 and 2008, and 13 per cent of members of the Government since 2000. Social and cultural constraints persisted and women were not very active in lobbying and advocacy activities.

28. The Constitution of January 2002 guaranteed that women would be included at all political, electoral and administrative levels. A national gender policy had been adopted in 2008 and an approved plan of action in the following year. The President, along with other African heads of State, had signed the Solemn Declaration on Gender Equality in Africa. The Congo had also ratified the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa and the Optional Protocol to the Convention on the Elimination of All Forms of Discrimination against Women.

29. A bill on women's representation in political, electoral and administrative positions was under consideration. Existing legislation, including the civil, family, tax and criminal codes, was being reviewed from a gender perspective. Strategies were in place to address restrictive cultural attitudes.

30. In the formal employment sector, women had equal access and remuneration and were entitled to maternity leave. In the civil service, they accounted for 33 per cent of employees. However, 75 per cent of women worked in the agricultural and fishing sector. The rudimentary and archaic means of production, the lack of access to energy sources and the restrictions on access to the formal financial credit system made it difficult for women to find income-generating activities in other areas.

31. There were a number of challenges to address to ensure women's equal participation in the economy.

Sex-disaggregated statistics were needed so that women's work in all development sectors could be measured. National legislation on trading and loans should be revised to take account of women's needs, motivations and difficulties. Support centres were needed to help women to find employment.

32. Violence against girls and women persisted in traditional discriminatory practices that included widowhood rites and levirate and sororate marriage. The Government was establishing a monitoring system for gender-specific crimes and legal clinics would be established to provide assistance to women victims of violence. A bill was being prepared on sexual harassment and violence against women and girls. Progress was hampered by women's lack of knowledge of legal texts and procedures, especially in rural areas, and the de facto dual system of customary law and modern law.

33. A revision of the penal code of 13 August 1980 was planned, in order to take into account the emerging evidence of violence, including cases of rape, paedophilia and sexual harassment in schools and in professional environments. Enforcement of the legislation that criminalized violence against women and girls was important and awareness-raising efforts should be oriented to both women and men.

34. Although there was a Ministry with responsibility for women's issues and a women's research centre, little attention was given to gender in sectoral policies, programmes and projects. The Government needed to establish an agreed framework on gender mainstreaming and a system for collection, processing and dissemination of sex-disaggregated data in all sectors. The National Gender Policy would be implemented through the Plan of Action 2009-2013, for which a total of \$16 million was required. The national budget would provide an allocation of \$9 million and funding was still sought for the remaining \$6 million.

35. Significant progress had been made in the area of primary education and institutional mechanisms. Sustained efforts were needed in secondary education, maternal and children's health, informal employment, gender-based violence and women's representation in decision-making. It would be possible to reduce inequalities by 2015, but social and cultural attitudes were still holding back progress in the empowerment of women. More sustained political action was needed

to reverse the current trend and ensure sustainable progress.

36. **Ms. Zhang** (China), reviewer, said that the improvement in the Congo's debt situation compared to 10 years previously had enhanced the country's capacity to achieve the MDGs. As women in developing countries were the most vulnerable to the impact of the international financial crisis, she wondered what measures the Congo had taken in that respect. She also asked what kind of technical assistance the Congo expected to receive from development partners and donor countries. What policy measures were being taken to provide social protection for women workers in the informal sector?

37. **Ms. Sportis** (France), reviewer, said that the area of health was a good example of the transversal nature of the MDGs. Results could only be achieved if treatment was made available to women and girls living with HIV/AIDS, while also providing care for women during pregnancy and birth. The best policy for addressing abortion in poor conditions was clearly prevention, and family planning and sex education should therefore be provided for girls and boys. A global response was needed to address those interconnected elements. She asked what road map the Government had to ensure progress on health issues by 2015. In particular, she wondered how access to health care would be addressed.

38. As women worked mainly in agriculture, it was important to strengthen the tertiary sector and find additional sources of employment for women. It would also be interesting to hear how the development programme addressed the rudimentary and archaic means of production and the lack of access to energy and formal credit.

39. In relation to violence against women, she said that in view of the past conflict, the Congo was starting from a more difficult position than other countries. In order to change people's mentalities, it was important to involve men and boys in that process. Violence in education was a serious problem, as it prevented girls from completing their secondary education and hindered their economic participation.

40. The conclusion of the report indicated the willingness of the Congo to engage in new partnerships for achieving the MDGs. It would be interesting to hear what kind of partnerships the Congo wished to establish, which areas were of interest and what goals had been set.

41. **Ms. Adou Ngapi** (Congo) said that gender was seen as a cross-cutting factor in poverty reduction policies and strategies. Women represented over half the country's population, and a great deal of advocacy and time had been required to make progress in meeting their needs, which were distinct from men's.

42. The high rate of maternal mortality — 781 per 100,000 live births — had been addressed under the national plan for implementation of the Millennium Development Goals. Almost no family planning was available in the Congo, a country emerging from conflict where many health centres had been destroyed. Government efforts included training for health workers and midwives to change mentalities regarding pre- and post-natal care and to strengthen women's economic capacity for access to care.

43. Legislation prohibited gender discrimination in employment, but in practice, especially in the private sector, women faced discrimination when requesting maternity leave. Most women were employed in the informal sector, where they had no access to social benefits. Financial credit from banks was also difficult for women to obtain; most used the services of microfinance institutions.

44. Violence against women was widespread in Congolese society. A study of textbooks and the media had shown that gender stereotypes supported violence at school. The Government was working with the media and also with traditional chiefs and religious leaders to address the issue through such means as focus groups and television programmes to raise awareness. Laws against gender violence existed, but the problem lay in their implementation. Victims often did not report violence and perpetrators thus enjoyed impunity. Training on gender violence had been provided for lawyers and the courts, and United Nations agencies and bilateral partners had provided support in that area.

45. Concerning the types of partnerships and assistance desired, she said that new forms of cooperation, either South-South or traditional North-South cooperation, would be welcome to bolster Government efforts to implement the gender plan of action.

46. **Mr. Martin** (Congo) said that girls and boys had equal rights to education, and the Government was fully involved in combating the violence in schools and in raising awareness of the problem. The national gender strategy opened the way for civil society participation. Human resources and leadership

development would be important tools in getting men involved in protecting women's rights.

Mongolia (E/2010/80)

47. **Ms. Gandi** (Mongolia), Member of Parliament and Minister for Social Welfare and Labour, introducing the national voluntary presentation of Mongolia, said that she took enormous pride in Mongolia's achievements in advancing women's rights, but she was aware of the enormous challenges that lay ahead in achieving the MDGs pertaining to women. Those challenges included providing women with equal opportunities to obtain work in conditions of freedom, equity and dignity; promoting women's political participation; and promoting the reproductive health of women and girls.

48. Empowering women and achieving gender equality required a multisectoral approach because of the important synergies among the Goals. Agricultural and rural development, better health systems and educational opportunities, climate change, disaster risk reduction and preparedness, migration, food security, strengthening of democratic governance — all those areas and sectors were interlinked, a fact that must be taken into account when designing policies and strategies.

49. A participatory approach was crucial when government and civil society came together to empower that half of the country's population whose talent and experiences could make a difference in the life of society as a whole. She also stressed the importance of a people-centred approach that put the livelihood and dignity of individuals and respect for human rights, including women's rights, at the forefront of efforts towards women's empowerment. Poverty was the worst assault on human dignity; it should be unacceptable in the twenty-first century.

50. Ongoing multiple crises — climate, water, the ecosystem, energy, food, jobs — undermined efforts to eradicate poverty. There was a specific need to support sustainable agriculture and rural development, especially in regions prone to natural disasters that disproportionately affected the livelihoods of rural women. The previous winter had been unusually severe and Mongolia had witnessed a major natural disaster that had led to the loss of over 8 million head of livestock and impacted the incomes and food security of almost 30 per cent of the population. The disaster had directly impacted maternal and infant mortality rates, which had risen, as had the poverty level. Special

attention should be paid to integration of a gender perspective into humanitarian response, especially in landlocked developing countries.

51. In closing, she expressed her Government's full support for the Secretary-General's campaign "Unite to End Violence against Women". It was time to put an end to violence against women, including trafficking in women and girls, through vigorous national, regional and international efforts backed by resources and political will.

52. **Ms. Enkhnasan** (Mongolia), accompanying her remarks with a computerized slide presentation, said that Mongolia promoted gender equality and women's empowerment within the overarching framework of democracy and human rights for all. It fully supported international human rights standards and was signatory to all major international instruments pertaining to women's rights and gender equality. In 2005, the Parliament had set concrete gender-related targets in employment, education, political participation and health. The comprehensive national development strategy adopted in 2008 reaffirmed the commitment to achievement of the MDGs.

53. In implementation of women's economic rights, Mongolia supported the ILO decent work agenda and the labour rights of all in line with the ILO Declaration on Fundamental Principles and Rights at Work. In 2001, Mongolia had adopted the Law on Employment Facilitation, through which the Government provided support for such services as job matching, professional training and retraining, business training and microcredit for establishment of new businesses. The Law on Supporting Small and Medium Enterprises had also been adopted in 2007.

54. Women played a central role in the economy, accounting for 51 per cent of the total workforce. In 2007, the female employment rate was 61.2 per cent and women's rate of participation in the workforce was 63.2 per cent, higher than the world average of 52.5 per cent. The proportion of women in non-agricultural paid jobs was just over 53 per cent from 2004-2008, signifying attainment of the MDG target and reflecting the relatively high educational level of Mongolian women. However, Mongolia faced challenges in ensuring decent jobs for all and gender equality in employment. Gender wage gaps had become a concern, with average salaries for women in non-agricultural jobs about 15 per cent lower than men's. Women were concentrated in low-paying sectors such as education, health, hospitality and retail, whereas men were

concentrated in high-productivity sectors like mining, construction and transport. Rural women worked the longest hours for the lowest pay, despite the fact that herder women played an important role in the production of cashmere, a major source of foreign currency.

55. Mongolia had learned that State policies must be based on gender-sensitive impact analyses and respond to gender-specific needs and vulnerabilities. Such specific factors as the small population, vast territory and significant gap between urban and rural areas must be taken into account in efforts to ensure every person's right to decent, productive and fruitful employment with fair wages on the basis of equality between men and women.

56. Turning to women's political participation, she said that the Constitution explicitly prohibited gender discrimination. Furthermore, citizens were free to establish or join a political party, leave a party and participate in political activities in accordance with the law. In 2005, Mongolia had adopted the target of Goal 3, a minimum of 30 per cent representation of women in the National Parliament by 2015. However, in 2008 the Parliament had suddenly moved to revoke the quota, and upheld that decision by overriding a presidential veto. The Gender Equality Law currently awaiting adoption was expected to support the process of women's political empowerment.

57. Significant progress had been made in women's representation at the local levels, with women currently making up 30.2 per cent of members of the local legislatures. The National Unity Government formed in 2008 included female ministers and vice-ministers. However, the current percentage of women in the Parliament, 3.9 per cent of 76 members, represented a step backward to the levels of 1992. There was need for extensive gender-sensitive voter education as well as intensive capacity-building for women candidates. A major lesson learned was that without the introduction of such temporary special measures as quotas, gender equality in decision-making could not be achieved by 2015. The ongoing process of reform of the electoral system must therefore include affirmative action to support women's nominations. Government must also cooperate with civil society to raise public awareness of the crucial importance of gender equality in decision-making.

58. Mongolia had made revolutionary changes in the area of reproductive health, recognizing women's right to make choices about their sexual and reproductive

lives. Since 1989, the Government had been working to introduce family planning services throughout the country to empower women and girls. It had set a target to reduce the maternal mortality rate to 50 per 100,000 live births by 2015, a fourfold reduction from 1990 levels. In cooperation with development partners, the Government had undertaken innovative measures to overcome the challenges presented by long distances, weak infrastructure and poor access to health care services in rural areas by setting up maternal rest homes in county and general hospitals to enable women to receive medical assistance for pregnancy and delivery in a timely fashion. A "telemedicine" project provided emergency professional services to women and children in remote areas through long-distance diagnosis. Initiatives to combine prenatal care with diagnosis, treatment and counselling for sexually transmitted diseases through one-stop-service centres in the capital and in national hospitals had also been established. As a result of those interventions, over the past 10 years Mongolia had reduced the maternal mortality rate by 2.3 times. In 2008, the MDG target of 50 per 100,000 live births had been reached. As a result of extensive public education on sexual and reproductive health, some 98 per cent of the population reported being aware of family planning, and 99 per cent of all pregnant women received prenatal care and delivered with the assistance of medical personnel.

59. Although maternal and child mortality rates were generally on the decline, there were wide discrepancies between rural and urban areas caused by poor infrastructure and communications in rural areas and a shortage of emergency care vehicles and qualified medical personnel. Natural disasters strained the capacity of the health-care system and migration led to the outflow of medical personnel from rural areas. The overall health status of girls and women was increasingly an issue of concern, and almost 50 per cent of women giving birth were reported to have experienced complications. In order to stabilize the achievements in reducing maternal and infant mortality rates, the system for delivering timely quality medical assistance to women in remote areas must be strengthened. To achieve sustainability, maternal health before pregnancy must be improved, along with health education for the general population, especially for adolescent girls.

60. The Government of Mongolia was committed to strengthening the national mechanism for promoting gender equality, women's empowerment and women's rights, and to strengthening coordination and

cooperation within and between the Government, civil society and other stakeholders. It realized the importance of high-quality, gender-disaggregated data for policy development, monitoring and impact assessment. It would also pursue the adoption and implementation of the Gender Equality Law currently under consideration by the Parliament.

61. **Ms. Urantsooj** (Mongolia), Vice-President of MonFemNet, a network of women's organizations, said that she was a member of the National Committee for Gender Equality and would like to raise some serious issues that had not been reflected in the report. First, the national gender equality structure was not given adequate human and financial resources. The gender focal points in each ministry lacked expertise for gender mainstreaming; the Government needed to build capacity in that area. Second, the wage gap between men and women had reached 20 per cent and women faced employment discrimination, sexual harassment and unequal access to credit. Those factors explained why most women were employed in the informal sector of the economy.

62. The process of preparing the national voluntary presentation had been highly participatory, using a series of consultations to define the issues to be presented. Both the Government side and the NGO side had been required to make the continuous effort to listen to each other's positions and develop a common understanding. The resulting report, unlike those presented to international treaty bodies, had represented the outcome of a shared effort and a fruitful process of cooperation.

63. **Mr. Errázuriz** (Chile), reviewer, said that he had taken note of the open and participatory process used in the preparation of the report, as well as the focus on maternal health and the Millennium Development Goals. He welcomed the statistical data provided in the annex to the report and affirmed that it appeared that Mongolia would reach the Goals regarding women's employment and maternal mortality rates by 2015.

64. The transition to democracy and a market economy in Mongolia had begun in 1990. Still, however, a vast gap remained between rural and urban women. A number of interesting initiatives had been undertaken in cooperation with United Nations system agencies on human security projects, including health, sanitation, water and job creation, and he would like to hear more details on those projects and their results. Women had made strides in their participation in the economy, yet their rate of participation was still lower

than that of men. He therefore asked the delegation to elaborate on specific social security policies from a gender perspective. He also wondered what obstacles remained to the adoption of the Gender Equality Act. Lastly, turning to women's health, it would be useful to have more information on women's health workers and whether there were sufficient numbers, especially trained birth attendants.

65. **Mr. Okuda** (Japan), reviewer, said that it was necessary to take into account the factors behind the development challenges Mongolia faced. He agreed that a multisectoral approach was crucial, and it was also significant for human security efforts to focus on the individual within the community and on protecting vulnerable members of society. Gender equality and women's empowerment were both crucial to the concept of human security, and strengthening of capacity in those areas was important. He was pleased that the report had referred to a project in cooperation with Japan, which would continue its cooperation with Mongolia, including through the United Nations Trust Fund for Human Security. He asked the delegation to elaborate on issues that should be kept in mind when assessing the role of donor countries in gender issues. The collaboration between government and civil society was indispensable, and he would also like to hear about the experience in Mongolia with civil society organizations and how the Government intended to strengthen its relationship with civil society in the future.

66. **Ms. Gandi** (Mongolia), interpreted by Ms. Enkhnasan, said that projects with support from the United Nations Trust Fund for Human Security had been undertaken in the areas of sustainable primary health care, rehabilitation of boarding schools, support to vulnerable urban areas and free basic education and health services for all, including improvements to living conditions and sanitation.

67. Social security measures encouraged women's participation in the workforce. The Social Welfare Law provided special allowances for pregnancy and for the care of infants. Mongolia was also party to several ILO Conventions, including those on equal treatment of men and women and on protection of mothers. The laws against domestic violence, the Family Code and the Labour Code all provided for the welfare of women.

68. Mongolia was working to create an enabling environment for women in the labour market through vocational training, where women participated at a

higher rate than men. The Social Insurance Law, a holdover from socialist times, set the retirement age for women five years earlier than that for men, which was now seen as discriminatory.

69. With the assistance of international agencies, the national machinery for gender equality had drafted a bill on sexual harassment in the workplace that was currently before Parliament. Some obstacles to gender mainstreaming did remain, especially regarding the 30 per cent quota for women in Parliament.

70. As to whether the country had enough health workers, almost all births were assisted by trained doctors, nurses and midwives. Donors should keep in mind the country's gender-specific context. Better gender-disaggregated data and gender-sensitive indicators were needed. Both the Government and civil society should increase awareness of the need for gender mainstreaming at all levels of budgeting.

71. The Government worked closely with civil society organizations to improve the legal framework for women's empowerment and in capacity-building and awareness-raising efforts, especially in combating trafficking in persons and domestic violence.

72. **Ms. Urantsooj** (Mongolia) said that civil society had worked very closely with the Government on drafting of the laws on domestic violence and on protection for disabled citizens, and would continue to lobby for their adoption in Parliament. There was room for improvement for implementation of the legal framework, however. It was also possible for NGOs to contract with the Government to provide services. The Government was drafting a national programme for the sustainable development of civil society organizations and had invited them to consult on its content.

73. **Mr. Zamba** (World Meteorological Organization (WMO)) said that many delegations at the Development Cooperation Forum had highlighted the negative impacts of natural disasters on their national economies and livelihoods. Hurricanes, floods and landslides were all normal behaviour of nature, but became disasters for humans, depending on the level of exposure, resilience and preparedness of communities.

74. Through the Intergovernmental Panel on Climate Change, the international community had gained a common understanding of the root cause of climate change: global warming. Some might scoff at the existence of global warming when a particularly severe winter like the one Mongolia had recently experienced occurred, yet global climate model projections

indicated that in many locations there might be less rain in summer and more snow in winter, drastically affecting the way of life in many countries. In fact, a negative temperature anomaly had been recorded in the United States of America and Canada in the summer of 2009, which would have had a serious impact in a less developed region.

75. Human behaviour was also a factor. The impact of disasters increased because people moved to more disaster-prone areas to find available land and water. Because people were trying to change the order of nature, they faced its inevitable response.

76. Therefore, climate change issues should be considered an integral part of the development paradigm and not just an emergency challenge. The World Meteorological Organization (WMO), in cooperation with other United Nations agencies and relevant national entities, had developed the Global Framework for Climate Services to assist countries in effort to explore science-based decision-making in their mitigation actions to stabilize the world climate by taking a knowledge-based approach to climate change.

The meeting rose at 5.50 p.m.